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UNCLAS OTTAWA 001640

SIPDIS

OES/IHA (Allindor), OES/PCI, WHA/CAN (RUNNING)

HHS FOR OFFICE OF THE SECRETARY, OFFICE OF  
INTERNATIONAL AFFAIRS (STEIGER)

CDC for Global Health Office (Cox)

E.O. 12958: N/A

TAGS: TBIO AMED CA

SUBJECT: WGSARS: Canada-wide Status Report June 10  
(Number 8)

Ref. (A) Toronto 1714(Ontario SARS Update #39)  
(B) Ottawa 1167 (Canada Wide Status Report #7)

¶1. As of June 9, 2003, Health Canada has received reports of 424 probable or suspect cases of severe acute respiratory syndrome (SARS) in Canada. There have been 33 deaths in Canada. Canadian officials maintain that to date, transmission has been limited to specific transmission settings such as households, hospitals and specific community settings. Health Canada has provided the following figures, accurate as of 13:00 EDT June 9, 2003:

¶2. The epicenter for SARS cases remains Toronto, Ontario with 225 probable (66 active) and 136 suspect (9 active) cases. See Toronto reporting for more detail.

¶3. There are no active cases in the remainder of the country.

¶4. British Columbia is reporting 4 probable (0 active) and 46 suspect (0 active) cases. Representing a net reduction of 8 suspect cases since the last Canada-wide update April 25th.

¶5. Saskatchewan is reporting 1 suspect (0 active) case. No change since the Canada-wide update of April 25th.

¶6. New Brunswick is reporting 2 suspect cases (0 active). No change since the Canada-wide update of April 25th.

¶7. Alberta is reporting 6 suspect cases (0 active). No change since April 26th (representing a net increase of 1 suspect case since our April 25th report).

¶8. Prince Edward Island is reporting 4 suspect cases (0 active). No change since the Canada-wide update of April 25th.

¶9. No reported cases of SARS in Quebec, Newfoundland, Nova Scotia, Quebec, Manitoba, Nunavut, Yukon or Northwest Territories.

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Health Canada broadens case definition for SARS  
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¶10. On May 29, Health Canada announced that Canada is aligning its clinical description of symptoms and signs of SARS with that of the WHO.

¶11. The previous definition of "severe progressive respiratory illness suggestive of atypical pneumonia or acute respiratory syndrome (RDS) with no known cause" has been replaced with: "radiographic evidence in infiltrates consistent with pneumonia or respiratory distress syndrome on chest x-ray with no known cause that can fully explain the illness."

¶12. According to Health Canada, the revised case definition for probable and suspect cases will not make a difference in the way cases are treated nor how cases are identified. Cases that are suspect or under investigation have always required appropriate treatment or attention.

¶13. The WHO and provincial and territorial officials have been apprised of the new definition.

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